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CONFIRMATION NO. 2448

<b>SERIAL NUMBER</b> 10/678,859	<b>FILING OR 371(c) DATE</b> 10/03/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3731	<b>ATTORNEY DOCKET NO.</b> 0104-P0003A
<b>APPLICANTS</b> In-Soon Son, Gyeonggi-Do, KOREA, REPUBLIC OF;				
<b>** CONTINUING DATA *****</b> <i>NONE, hamnguyen 4/10/07</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>YES, hamnguyen 4/10/07</i> REPUBLIC OF KOREA 2003-0008620 02/11/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/29/2003 <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance Verified and Acknowledged <i>hamnguyen</i> <i>Initials</i> Examiner's Signature		<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 9
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 66837				
<b>TITLE</b> Medical controller for segmental spinal cord reflex points				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	